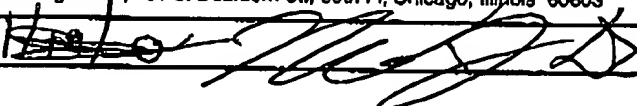


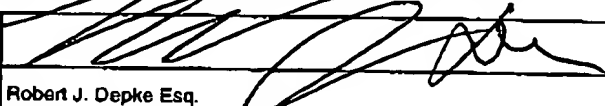
PTO/SB/21 (09-04)
Approved for use through 07/31/2006. OMB 0651-0031
U.S. Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE

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TRANSMITTAL FORM (to be used for all correspondence after initial filing)	Application Number	09/809,630	FAX RECEIVED NOV 09 2005 OFFICE OF PETITIONS
	Filing Date	July 19, 2001	
	First Named Inventor	Yakov Kamen	
	Art Unit	2678	
	Examiner Name	Antonio A. Caschera	
Total Number of Pages in This Submission	Attorney Docket Number	091451.00146	

ENCLOSURES (Check all that apply)		
<input type="checkbox"/> Fee Transmittal Form	<input type="checkbox"/> Drawing(s)	<input type="checkbox"/> After Allowance Communication to TC
<input checked="" type="checkbox"/> Fee Attached	<input type="checkbox"/> Licensing-related Papers	<input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences
<input checked="" type="checkbox"/> Amendment/Reply	<input type="checkbox"/> Petition	<input type="checkbox"/> Appeal Communication to TC (Appeal Notice, Brief, Reply Brief)
<input type="checkbox"/> After Final	<input type="checkbox"/> Petition to Convert to a Provisional Application	<input type="checkbox"/> Proprietary Information
<input type="checkbox"/> Affidavits/declaration(s)	<input type="checkbox"/> Power of Attorney, Revocation	<input type="checkbox"/> Status Letter
<input checked="" type="checkbox"/> Extension of Time Request	<input type="checkbox"/> Change of Correspondence Address	<input type="checkbox"/> Other Enclosure(s) (please identify below):
<input type="checkbox"/> Express Abandonment Request	<input type="checkbox"/> Terminal Disclaimer	
<input type="checkbox"/> Information Disclosure Statement	<input type="checkbox"/> Request for Refund	
<input type="checkbox"/> Certified Copy of Priority Document(s)	<input type="checkbox"/> CD, Number of CD(s) _____	
<input type="checkbox"/> Reply to Missing Parts/Incomplete Application	<input type="checkbox"/> Landscape Table on CD	
<input type="checkbox"/> Reply to Missing Parts under 37 CFR 1.52 or 1.53	<div style="border: 1px solid black; padding: 2px;">Remarks</div> <p>The Commissioner is hereby authorized to charge any fees due or credit any overpayment to Deposit account No. 50-1794</p>	
CUSTOMER NO. 33448		

SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT		
Firm Name	Robert J. Depke, Holland & Knight LLP, 131 S. Dearborn St., 30th Fl, Chicago, Illinois 60603	
Signature		
Printed name	Robert J. Depke Esq.	
Date	11/19/05	Reg. No. 37,607

CERTIFICATE OF TRANSMISSION/MAILING		
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Typed or printed name	Robert J. Depke Esq.	Date 11/19/05

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IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

Appl. No.:	09/909,630	Confirmation No.:	9979
Applicant:	Yakov Kamen		
Filed:	July 19, 2001		
TC/A.U.:	2676		
Examiner:	Antonio A. Caschera		
Docket No.:	091451.00146		
Customer No.:	33448	FAX RECEIVED	

NOV 09 2005

AMENDMENT B

OFFICE OF PETITIONS

Mail Stop-Fee Amendment
Commissioner for Patents
P.O. Box 1450
Alexandria, Virginia 22313-1450

S I R:

In response to the Office Action dated July 19, 2004, please amend the above-identified application as follows:

Amendments to the Claims begin on page 2 of this paper.

Remarks/Arguments begin on page 9 of this paper.